## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

07319-110001

| CLAIMS AS FILED - PART I (Column 1) (Column 2)  |   |                                 |              |                           |              |                  |       | SMALL ENTITY TYPE |  |       | OTHER THAN |                        |  |
|---|---|---------------------------------|--------------|---------------------------|--------------|------------------|-------|-------------------|--|-------|------------|------------------------|--|
| TOTAL CLAIMS  |   |                                 | 11           |                           |              |                  |       | RATE              | FEE  | 7     | RATE       | FEE                    |  |
| FOR   |   |                                 | NUMBER FILED |                           | NUMBER EXTRA |                  |       | BASIC FE          | <del></del>                                      | OB    | BASIC FEE  | <del></del>            |  |
| TOTAL CHARGEABLE CLAIMS   |   |                                 | // minus 20= |                           | · A          |                  |       | X\$ 9=            | <del>                                     </del> | 1     | X\$18=     |                        |  |
| INDEPENDENT CLAIMS  |   |                                 |              |                           | • 5          |                  |       |                   | <del>  .</del> –                                 | OR    | A310=      |                        |  |
| _   |   | NDENT CLAIM P                   | <del></del>  | iiius 3 =                 | 4            |                  |       | X43=              | ļ  | OR    | X86=       |                        |  |
|   | <del></del>   | 10 //                           |              |                           |              |                  |       | +145=             |  | OR    | +290=      |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2  |   |                                 |              |                           |              | •                | TOTAL |                   | OR   | TOTAL | 770        |                        |  |
| CLAIMS AS AMENDED - PART II   |   |                                 |              |                           |              |                  |       | OTHER THAN        |  |       |            |                        |  |
| (Column 1)  |   |                                 | (Column 2) ( |                           |              | (Column 3)       | 1 F   | SMALL             |  | OR    | SMALL      | ENTITY                 |  |
| AMENDMENT A   |   | REMAINING<br>AFTER<br>AMENDMENT |              | NUME<br>PREVIO<br>PAID F  | BER<br>BUSLY | PRESENT<br>EXTRA |       | RATE              | ADDI-<br>TIONAL<br>FEE                           |       | RATE       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | *                               | Minus        | **                        | 7            | =                |       | X\$ 9=            |  | OR    | X\$18=     |                        |  |
| AME   | Independent   | *                               | Minus        | ***                       | <u> </u>     | =                |       | X43=              |  | OR    | X86=       |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                                 |              |                           |              |                  |       | +145=             |  | OR    | +290=      |                        |  |
|   | •   |                                 |              |                           | •            |                  | L     | TOTAL             |  | 1     | TOTAL      |                        |  |
|   |   | Α                               | DDIT. FEE    |                           | 10           | ADDIT. FEE       | •     |                   |  |       |            |                        |  |
| _   | <del></del>   | (Column 1)<br>CLAIMS            |              | (Colum                    | ST           | (Column 3)       | lr    |                   | ADDI-  | 1 1   |            | 400                    |  |
| AMENDMENT B   |   | REMAINING<br>AFTER              |              | NUMB<br>PREVIO            | _            | PRESENT<br>EXTRA |       | RATE              | TIONAL   |       | RATE       | ADDI-<br>TIONAL        |  |
|   |   | AMENDMENT                       |              | PAID F                    | OR           |                  | ▎▐    |                   | FEE  |       | <u> </u>   | FEE                    |  |
|   | Total   | *                               | Minus        | **                        | ·<br>        | =                |       | X\$ 9=            | ٠.   | OR    | X\$18=     |                        |  |
|   | Independent   | *                               | Minus        | ***                       |              | =                | H     | X43=              | •  | OR    | X86=       |                        |  |
|   | FIRST PRESE   | NTATION OF MU                   | JLTIPLE DEF  | PENDENT                   | CLAIM        |                  |       | +145=             |  | OR    | +290=      |                        |  |
|   |   |                                 |              |                           |              |                  |       | TOTAL             |  | L     | TOTAL      |                        |  |
|   |   |                                 |              |                           |              |                  |       | DDIT. FEE         |  | OR /  | ADDIT. FEE |                        |  |
|   |   | (Column 1)                      | · ·          | (Colum                    |              | (Column 3)       | _     |                   | •  |       |            | ,                      |  |
| AMENDMENT C   | · .   | REMAINING<br>AFTER<br>AMENDMENT |              | NUMB<br>PREVIOU<br>PAID F | ER .<br>USLY | PRESENT<br>EXTRA |       | RATE              | ADDI-<br>TIONAL<br>FEE                           |       | RATE       | ADDI-<br>TIONAL<br>FEE |  |
|   | Total   | *                               | Minus        | **                        |              | =                | Γ     | X\$ 9=            |  | OR    | X\$18=     |                        |  |
|   | Independent   | *                               | Minus        | ***                       |              | =                | F     | X43=              |  | - 1   | X86=       |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |                                 |              |                           |              |                  |       |                   |  | OR    |            |                        |  |
| • µ   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. |                                 |              |                           |              |                  |       |                   |  | OR    | +290=      | <u> </u>               |  |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                                 |              |                           |              |                  |       |                   |  |       |            |                        |  |